## IOWALETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A

AH 10: 59 Fax: (515)281-3701 2007 SET 21 www.iowa.gov/ethics

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lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

## FORM-GBG

Gift, Bequest, or Grant Information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OF	GRANT:
Name of Department or Office	
Name of Department or Office  Mailing Address / /// / 84/ 0.5.6.0 City	
6411484-2560	State, Zip Code
Area Code & Telephone No.	
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:	
<u>Deb Hanus</u>	
Name	
Mailing Address (if different from above)  DHanus Cans. State, 1a. US	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)
ONOR OF GIFT, BEQUEST, OR GRANT:	The article regiment of the most first above)
Name 100 College Drive Decord A5210 Mailing Address City, State, Zip Code  Area Code & Telephone Number  Email Address (optional)  Provide a description of the gift, bequest, or grant and purpose thereof:	\$ 25 Date of Gift, Bequest, or Grant Amount/Value*  *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
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Criteria to use this form:	
Receipt of any gift, bequest, or grant that is received by any department of the	state or received by the Governor on behalf of the state.
tement of Affirmation:	
heb Hanus affirm that the gift, beguest, or grant reported above	ve is accurate. I further affirm that the information concerning the